

Grandparent Information

Please enter the following, if applicable, for the purpose of communication of special events, programs, & giving opportunities. If you do **not** wish grandparents to receive TKA information please indicate by checking _____ No

Paternal Grandparents _____
Mailing Address _____
City State Zip

Maternal Grandparents _____
Mailing Address _____
City State Zip

Parent's/Guardian's Church:

How often do you and your child attend church? _____ weekly _____ monthly
Pastor _____
Church _____
Church Address _____ Phone _____

Enrollment Agreement

It is extremely important that a Christian home support the Academy. As parent or guardian, I desire to enroll my child in The King's Academy subject to the terms of tuition and fee payment established by The King's Academy Board of Trustees. I agree to make timely payments of the financial obligations to the school. I commit that I will train my child at home in the Word of God and attend church with my child regularly. I accept the conditions of admission and enrollment. I agree to abide by and support requirements and policies contained in the TKA Family Handbook and support the decisions of the staff, administration and Board of Trustees. I understand that TKA does not request information regarding who can pick my children up from school. If I have any restrictions regarding who cannot pick up my children, I will make an appointment with an administrator after submitting my application. I agree to actively serve as volunteer in at least one area (i.e. PTF, Booster, Fun-Raising Committee, etc.) and help support the Annual Fund and Capital Campaign.

Signature _____

Relationship to child _____ Date _____

Annual Fund

Parents: We desire 100% participation in the Annual Fund. Remember this is a tax-deductible gift, which offsets operational costs.

_____ *Yes, I would like to help make the difference at The King's Academy.*

[] \$ _____ as a one time gift

[] \$ _____ per month for _____ months for a total gift of \$ _____